

Coronavirus Disease 2019 (COVID-19)



Homelessness and COVID-19 FAQs

Updated Sept. 16, 2020 [Print](#)

Frequently Asked Questions

Are people experiencing homelessness at risk of COVID-19? —

Because many people who are homeless are older adults or [have underlying medical conditions](#) they may also be at increased risk for severe illness than the general population. Health departments and healthcare facilities should be aware that people who are homeless are a particularly vulnerable group. If possible, identifying non-congregate settings where those at increased risk can stay may help protect them from COVID-19.

How can people experiencing homelessness protect themselves when COVID-19 is spreading in their community? —

Many of the [recommendations to prevent COVID-19](#) may be difficult for a person experiencing homelessness to do. Although it may not be possible to avoid certain crowded locations (such as shelters), people who are homeless should try to avoid other crowded public settings and public transportation. If possible, they should use take-away options for food. As is true for everyone, they should maintain a distance of about 6 feet (two arms' length) from other people. They also should wash their hands with soap and water for at least 20 seconds as often as possible, and cover their coughs and sneezes.

What should a person who is experiencing homelessness do if they have symptoms consistent with COVID-19? –

Any person experiencing homelessness with [symptoms consistent with COVID-19](#) (fever, cough, or shortness of breath) should alert their service providers (such as case managers, shelter staff, and other care providers). These staff will help the individual understand how to isolate themselves and identify options for medical care as needed.

Where can people experiencing homelessness be tested for COVID-19? –

If they meet [criteria for testing](#), people experiencing homelessness will access COVID-19 testing through a healthcare provider. Local public health and healthcare facilities need to determine the best location for this testing in coordination with homeless healthcare clinics and street medicine clinics.

Where should a person who is experiencing homelessness stay if they are suspected to have COVID-19 or if they have tested positive for COVID-19? –

Those with suspected or confirmed COVID-19 should stay in a place where they can best be isolated from other people to prevent spreading the infection. Local health departments, housing authorities, homeless service systems and healthcare facilities should plan to identify locations to isolate those with known or suspected COVID-19 until they [meet the criteria to end isolation](#). Isolation housing could be units designated by local authorities or shelters determined to have capacity to sufficiently isolate these people. If no other options are available, homeless service providers should plan for how they can help people isolate themselves while efforts are underway to provide additional support. Please see the [Interim Guidance for Homeless Service Providers](#) and [Interim Guidance for People Experiencing Unsheltered Homelessness](#) for more information.

Can homeless service providers accept donations?

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Homeless service providers can accept donations during community spread of COVID-19, but general infection control precautions should be taken. Request that donors not donate if they are sick. Set up donation drop-off points to encourage social distancing between shelter workers and those donating. According to usual procedures, launder donated clothing, sheets, towels, or other fabrics on high heat settings, and disinfect items that are nonporous, such as items made of plastic. Food donations should be shelf-stable, and shelter staff should take usual food-related infection prevention precautions. For more information about COVID-19 and food, see the Food and Drug Administration's website on [Food Safety and COVID-19](#) [↗](#). For further information on cleaning and disinfection, see [here](#).

Should homeless shelters screen clients?

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Homeless shelters can screen clients for symptoms of respiratory infections.

Clients who have symptoms may or may not have COVID-19. Make sure they have a separate place they can safely stay within the shelter or at an alternate site in coordination with local health authorities. An on-site nurse or other clinical staff can help with clinical assessments.

- Provide anyone who presents with symptoms with a mask.
- Facilitate access to non-urgent medical care as needed.
- Use standard facility procedures to determine whether a client needs immediate medical attention. Emergency signs include:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion or inability to arouse
 - Bluish lips or face

Notify the designated medical facility and personnel to transfer clients that the client might have COVID-19.

Should homeless shelters close?

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Homeless shelters serve a critical function in our communities. Shelters should stay open unless homeless service providers, health departments, and housing authorities have determined together that a shelter needs to close.

Should homeless encampments be cleared?

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Connecting people to stable housing should continue to be a priority. However, if individual housing options are not available, allow people who are living in encampments to remain where they are. Encourage people living in encampments to increase space between people and provide hygiene resources in accordance with the [Interim Guidance for People Experiencing Unsheltered Homelessness](#).

Does CDC have additional guidance for homeless shelters planning for winter?

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High shelter demand during the winter might make it difficult for people to stay 6 feet away from each other, an important strategy for slowing the spread of COVID-19. Nonetheless, offering shelter from cold weather is important for preventing cold weather injuries. Public health jurisdictions and homeless service providers should work with local partners to continue connecting people experiencing homelessness to permanent housing, while also creating a plan for winter shelter needs that includes a cold weather response for increased demand.

Shelters should continue using CDC's [interim guidance for homeless service providers to plan and respond to COVID-19](#) for their winter planning. They are also encouraged to

1. Consult their local health department and use the [Infection Control Inventory and Planning tool](#)  before opening a shelter.
2. Review CDC's interim guidance for [office buildings](#).
 - a. Consider taking steps to improve ventilation in the building.
 - b. Consider using [ultraviolet germicidal irradiation](#) as a supplemental technique to inactivate potential airborne virus in the [upper-room](#) air of common occupied spaces, in accordance with industry guidelines.
3. Offer or promote the flu vaccine to people experiencing homelessness and homeless service provider staff to [prevent seasonal flu](#).

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Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)